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APPLICANTS

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** CONTINUING DATA *****

This application is a 371 of PCT/FR04/02008 07/27/2004

** FOREIGN APPLICATIONS *****

FRANCE 03/09787 08/08/2003

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 06/14/2006

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY FRANCE	SHEETS DRAWING 13	TOTAL CLAIMS 9	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

ADDRESS

26161

TITLE

Method for determination of an ophthalmic lens using an astigmatism prescription for far sight and for near sight

FILING FEE RECEIVED 1030	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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